## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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## Jun 20, 2007 08:00 AN **DOCUMENT # P00000114720 Secretary of State AUTO TECH TIRES COMPANY** Principal Place of Business Mailing Address 8761 SW 40TH ST. 8761 SW 40TH ST. MIAMI, FL 33165 MIAMI, FL 33165 06112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1068872 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent LUIS, REINA F DO NOT WRITE 8761 SW 40ST MIAMI, FL 33165 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Due by September 14, 2007 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE REINA. FELIPE NAME STREET ADDRESS 17187 SW 144TH COURT CITY-ST-ZIP MIAMI, FL 33177 TITLE STREET ADDRESS CITY-ST-ZIP MILE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplierhental report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all otherwise empowered.

INTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**